Oklahoma Corporation Commission
Transportation Division/Motor Carrier Violations P.O. Box 52000 Oklahoma City, Oklahoma 73152-2000 (405) 521-2965 / TREnfSupport@occ.ok.gov



HEARING REQUEST – MOTOR CARRIER CITATION			
	MOTOR CARRIER INFORMATI	ON	
Motor Carrier Name:	t attached to this form for additional information on cor USDOT	#:	
	ive Name:		
Mailing Address:	Mailing City/State/Zip:		
	Email:		
For corporations and LLCs, p	esent the Corporation/LLC in this matter? resentation of witnesses, testimony, and other corporation, the owner of an LLC or corporation is limited.	urt processes will require attorney	
ATTORNEY INFORMATION (if applicable)			
Attorney Name: Mailing Address:	e: Mailing City/State/Zip: Email:		
CITATION INFORMATION			
Citation Number(s): List all	citation numbers you would like to contest.		
12	3 4	5	
Basis for Contesting C	itation(s): Briefly explain the reason for contes	ting the citation(s).	
I have additional evidence to submit? YES NO If you have additional evidence to submit, please submit in PDF format with this completed form to the email address located on this form and in the instructions, referencing the contested citation numbers in the subject line of the email.			

WITNESS INFORMATION			
Witness Name	Phone Number	Brief statement of the testimony they will offer at the hearing	

# **Oklahoma Corporation Commission**

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## **HEARING REQUEST FORM INSTRUCTION SHEET:**

- > See additional information at: https://www.oklahoma.gov/occ/citations.html
- Submit the completed form and any supporting documents (in PDF format) to: <u>TREnfSupport@occ.ok.gov</u>
- An acknowledgement of receipt of emailed hearing request will be sent to the sender
- ➤ Hearing requests must be complete and will be denied unless ALL required information is submitted
- MOTOR CARRIER INFORMATION: (Defendant listed on the citation(s) being contested)
  - o Motor Carrier Name
  - o USDOT #, if applicable
  - o DBA (Doing Business As), if applicable
  - o Representative (who to contact at the company regarding this request)
  - o Mailing address of defendant
  - o Contact phone number of company representative listed above
  - o Email address for correspondence
  - o Is the Motor Carrier a registered Corporation, LLC, Partnership, etc.? (Yes or No)

## • NOTE:

- o If this citation was issued to a registered motor carrier, the motor carrier (not the driver) is the defendant
- For corporations and LLCs, presentation of witnesses, testimony, and other court processes will require attorney representation. Without an attorney, the owner of an LLC or corporation is limited to making a brief statement of fact.
- ATTORNEY INFORMATION, if applicable (only complete if you have retained an attorney in this matter):
  - Name of Firm or Organization
  - Attorney representative name
  - Mailing address of attorney
  - o Contact phone number of attorney listed above
  - o Attorney Email address for correspondence

## • CITATION INFORMATION:

- List all citation numbers related to this request
  - The citation number is the MCC number listed in the upper left-hand corner
  - Only citations issued at the same time should be included on one Hearing Request form
  - Each occurrence will require a separate form to be completed and submitted
  - Only the citations listed on the form will be considered
- o Briefly explain the reason these citations are being contested
- Will additional information be submitted?
  - If **YES**, please include any documents as an attachment (PDF format only) in the email when submitting this completed form to: *TREnfSupport@occ.ok.gov*
  - Please submit any questions or issues regarding attachments to: TREnfSupport@occ.ok.gov

#### • WITNESS INFORMATION:

- Witnesses name(s)
- o Contact phone number of witness for hearing
- o Brief statement of the testimony they will offer at the hearing

BE ADVISED, AT THE HEARING ONLY TWO ATTEMPTS MAY BE MADE TO CONTACT THE PARTIES, WITNESSES OR ATTORNEYS LISTED ON THE HEARING REQUEST FORM

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